# REPORT - HIPAA 271 to MHD mapped fields only

| Loop | SegID | HIPAA Name | DT | Req | File | Field | DT | Comment | CommentType |
|------|-------|-----------|-----|-----|------|-------|-----|---------|-------------|
| | | *Eligibility, Coverage or Benefit Information* | | | | | | | |
| | **ST** | **Transaction Set Header** | | **R** | | | | | |
| | ST 01 | Transaction Set Identifier Code | ID3 | R | | | | Hard code "271" | Translation |
| | ST 02 | Transaction Set Control Number | AN9 | R | | | | sequence # start 1 by 1 for each ST-SE | Translation |
| | **BHT** | **Beginning of Hierarchical Transaction** | | **R** | | | | | |
| | BHT01 | Hierarchical Structure Code | ID4 | R | | | | Hard code "0022" | Translation |
| | BHT02 | Transaction Set Purpose Code | ID2 | R | | | | Hard code "11"-response | Translation |
| | BHT03 | Submitter Transaction Identifier | AN30 | S | | | | Get from 270 BHT03 | Match Back |
| | BHT04 | Transaction Set Creation Date | DT8 | R | | | | Generate current date | Translation |
| | BHT05 | Transaction Set Creation Time | TM8 | R | | | | Generate current time | Translation |
| *2000A* | *HL* | *Information Source Level* | | *R* | | | | | |
| **2000A** | **HL** | **Information Source Level** | | **R** | | | | | |
| 2000A | HL 01 | Hierarchical ID Number | AN12 | R | | | | sequence number: start 1 by 1 for each HL segment in ST-SE | Translation |
| 2000A | HL 03 | Hierarchical Level Code | ID2 | R | | | | Hard code "20"-info source | Translation |
| 2000A | HL 04 | Hierarchical Child Code | ID1 | R | | | | Hard code "1" | Translation |

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|------|-------|-----------|-----|-----|------|-------|-----|---------|-------------|
| 2000A | AAA | Request Validation | | S | | | | Information Source must return complex error response codes. | Processing Logic |
| *2100A* | *NM1* | *Information Source Name* | | *R* | | | | | |
| 2100A | NM1 | Information Source Name | | R | | | | | |
| 2100A | NM101 | Entity Identifier Code | ID3 | R | | | | Hard code "PR"-Payer | Translation |
| 2100A | NM103 | Information Source Last or Organization Name | AN35 | S | | | | Hard code "Washington State DSHS <Admin>" | Translation |
| 2100A | NM108 | Identification Code Qualifier | ID2 | R | | | | Hard code "XV"-Nat'l PlanID or "FI"-TaxID | Translation |
| 2100A | NM109 | Information Source Primary Identifier | AN80 | R | | | | Hard code admin's PlanID or Tax ID | Translation |
| 2100A | REF | Information Source Additional Identification | | S | | | | | |
| 2100A | PER | Information Source Contact Information | | S | | | | | |
| 2100A | PER01 | Contact Function Code | ID2 | R | | | | Hard code "IC" | Translation |
| 2100A | PER02 | Information Source Contact Name | AN60 | S | | | | Hard code "<Provider Relations>" | Translation |
| 2100A | PER04 | Information Source Communication Number | AN80 | S | | | | Hard code "<phone>" | Translation |
| 2100A | AAA | Request Validation | | S | | | | | |
| *2000B* | *HL* | *Information Receiver Level* | | *S* | | | | | |
| 2000B | HL | Information Receiver Level | | S | | | | | |
| 2000B | HL 03 | Hierarchical Level Code | ID2 | R | | | | Hard code "21"-info receiver | Translation |
| 2000B | HL 04 | Hierarchical Child Code | ID1 | R | | | | Hard code "1" | Translation |

| Loop | SegID | HIPAA Name | DT | Req | File | Field | DT | Comment | CommentType |
|------|-------|-----------|-----|-----|------|-------|-----|---------|-------------|
| *2100B* | *NM1* | *Information Receiver Name* | | *R* | | | | Return whatever was in the corresponding fields of the 270. | Match Back |
| **2100B** | **NM1** | **Information Receiver Name** | | **R** | | | | | |
| 2100B | NM109 | Information Receiver Identification Number | AN80 | R | | | | Return whatever was in the corresponding fields of the 270. | Match Back |
| **2100B** | **REF** | **Information Receiver Additional Identification** | | **S** | | | | | |
| 2100B | REF02 | Information Receiver Additional Identifier | AN30 | R | | | | Return whatever was in the corresponding fields of the 270. | Match Back |
| **2100B** | **AAA** | **Information Receiver Request Validation** | | **S** | | | | | |
| *2000C* | *HL* | *Subscriber Level* | | *S* | | | | | |
| **2000C** | **HL** | **Subscriber Level** | | **S** | | | | | |
| 2000C | HL 03 | Hierarchical Level Code | ID2 | R | | | | Hard code "22"-subscriber | Translation |
| **2000C** | **TRN** | **Subscriber Trace Number** | | **S** | | | | | |
| 2000C | TRN01 | Trace Type Code | ID2 | R | | | | Hard code "2"-referenced transaction trace number | Translation |
| 2000C | TRN02 | Trace Number | AN30 | R | | | | Get from 270 Loop 2000C TRN03 | Match Back |
| 2000C | TRN03 | Trace Assigning Entity Identifier | AN10 | R | | | | Hard code "2"-info receiver | Translation |
| 2000C | TRN04 | Trace Assigning Entity Additional Identifier | AN30 | S | | | | Get from 270 Loop 2000C TRN03 | Match Back |
| *2100C* | *NM1* | *Subscriber Name* | | *R* | | | | | |
| **2100C** | **NM1** | **Subscriber Name** | | **R** | | | | | |
| 2100C | NM101 | Entity Identifier Code | ID3 | R | | | | Hard code "IL"-subscriber or insured | Translation |
| 2100C | NM103 | Subscriber Last Name | AN35 | S | UND_ConDem og | Surname | char | required | HIPAA Required |

| Loop | SegID | HIPAA Name | DT | Req | File | Field | DT | Comment | CommentType |
|------|-------|-----------|-----|-----|------|-------|-----|---------|-------------|
| 2100C | NM104 | Subscriber First Name | AN25 | S | UND_ConDem og | GivenName | varchar | required | HIPAA Required |
| 2100C | NM108 | Identification Code Qualifier | ID2 | S | | | | Send "MI"-Member ID (Medicaid ID/PIC) | Translation |
| 2100C | NM109 | Subscriber Primary Identifier | AN80 | S | UND_ConDem og | CID | char | required | HIPAA Required |
| 2100C | NM109 | Subscriber Primary Identifier | AN80 | S | UND_ConDem og | RUID | int | required | HIPAA Required |
| **2100C** | **REF** | **Subscriber Additional Identification** | | **S** | | | | Multiple REF segments for different IDs.  IF 270 had "EJ" REF with patient acct num, it must be returned here. | Match Back |
| 2100C | REF01 | Reference Identification Qualifier | ID3 | R | | | | Return any IDs sent in 270 | Match Back |
| 2100C | REF02 | Subscriber Supplemental Identifier | AN30 | R | | | | Only return SSN if it's sent in the 270 | Policy Issues |
| **2100C** | **N 3** | **Subscriber Address** | | **S** | | | | Privacy:  don't send patient's address? | System Questions |
| **2100C** | **N 4** | **Subscriber City/State/ZIP Code** | | **S** | | | | We do not send client's address for privacy reasons. | Processing Logic |
| 2100C | N 405 | Location Qualifier | ID2 | S | | | | hard code "CY"-county | Translation |
| **2100C** | **PER** | **Subscriber Contact Information** | | **S** | | | | | |
| **2100C** | **AAA** | **Subscriber Request Validation** | | **S** | | | | | |
| **2100C** | **DMG** | **Subscriber Demographic Information** | | **S** | | | | | |
| 2100C | DMG02 | Subscriber Birth Date | AN35 | S | UND_ConDem og | DateBirth | char | In the format CCYYMMDD | Translation |
| 2100C | DMG03 | Subscriber Gender Code | ID1 | S | UND_ConDem og | Gender | char | Map internal "1" to "M" and "2" to "F" | Translation |
| **2100C** | **INS** | **Subscriber Relationship** | | **S** | | | | | |

| Loop | SegID | HIPAA Name | DT | Req | File | Field | DT | Comment | CommentType |
|------|-------|-----------|-----|-----|------|-------|-----|---------|-------------|
| **2100C** | **DTP** | **Subscriber Date** | | **S** | | | | Don't put elig dates here; put them in EB loop. | Translation |
| 2100C | DTP01 | Date Time Qualifier | ID3 | R | | | | "435"-admit; "472"-service; "771"-status, etc. | Processing Logic |
| 2100C | DTP03 | Date Time Period | AN35 | R | | | | (subscriber level dates for all cov'g) | Processing Logic |
| *2110C* | *EB* | *Subscriber Eligibility or Benefit Information* | | *S* | | | | | |
| **2110C** | **EB** | **Subscriber Eligibility or Benefit Information** | | **S** | | | | | |
| 2110C | EB 01 | Eligibility or Benefit Information | ID2 | R | | | | For recipient Medicaid benefits, send "1"-active coverage. | Translation |
| 2110C | EB 02 | Benefit Coverage Level Code | ID3 | S | | | | hard code "IND"-individual | Translation |
| 2110C | EB 03 | Service Type Code | ID2 | S | | | | "30"-generic request | Policy Issues |
| 2110C | EB 05 | Plan Coverage Description | AN50 | S | UND_ConDemog | RUID | int | Map MMIS fields to list of all legends on the ID card. | Map Codes |
| **2110C** | **HSD** | **Health Care Services Delivery** | | **S** | | | | | |
| **2110C** | **REF** | **Subscriber Additional Identification** | | **S** | | | | | |
| **2110C** | **DTP** | **Subscriber Eligibility/Benefit Date** | | **S** | | | | | |
| 2110C | DTP01 | Date Time Qualifier | ID3 | R | | | | send "307"-elig with eligibility as a date range | Translation |
| 2110C | DTP03 | Eligibility or Benefit Date Time Period | AN35 | R | | | | Default to current month | Translation |
| **2110C** | **AAA** | **Subscriber Request Validation** | | **S** | | | | | |
| **2110C** | **MSG** | **Message Text** | | **S** | | | | | |

| Loop | SegID | HIPAA Name | DT | Req | File | Field | DT | Comment | CommentType |
|------|-------|-----------|-----|-----|------|-------|-----|---------|-------------|
| 2110C | MSG01 | Free Form Message Text | AN264 | R | | | | Hardcode "This is the client's eligibility as of this date, based on information available at this time." | Translation |
| *2115C* | *III* | *Subscriber Eligibility or Benefit Additional Information* | | *S* | | | | | |
| 2115C | III | Subscriber Eligibility or Benefit Additional Information | | S | | | | | |
| 2115C | LS | Loop Header | | S | | | | | |
| *2120C* | *NM1* | *Subscriber Benefit Related Entity Name* | | *S* | | | | | |
| 2120C | NM1 | Subscriber Benefit Related Entity Name | | S | | | | | |
| 2120C | N 3 | Subscriber Benefit Related Entity Address | | S | | | | | |
| 2120C | N 4 | Subscriber Benefit Related City/State/ZIP Code | | S | | | | | |
| 2120C | PER | Subscriber Benefit Related Entity Contact Information | | S | | | | | |
| 2120C | PRV | Subscriber Benefit Related Provider Information | | S | | | | | |
| 2120C | LE | Loop Trailer | | S | | | | | |
| *2000D* | *HL* | *Dependent Level* | | *S* | | | | Subscriber is usually the Patient, so there's no Dependent Loop (2000D). | Processing Logic |
| 2000D | HL | Dependent Level | | S | | | | | |
| 2000D | TRN | Dependent Trace Number | | S | | | | | |
| *2100D* | *NM1* | *Dependent Name* | | *R* | | | | | |

| Loop | SegID | HIPAA Name | DT | Req | File | Field | DT | Comment | CommentType |
|------|-------|------------|-----|-----|------|-------|-----|---------|-------------|
| 2100D | NM1 | Dependent Name | | R | | | | | |
| 2100D | REF | Dependent Additional Identification | | S | | | | | |
| 2100D | N 3 | Dependent Address | | S | | | | | |
| 2100D | N 4 | Dependent City/State/ZIP Code | | S | | | | | |
| 2100D | PER | Dependent Contact Information | | S | | | | | |
| 2100D | AAA | Dependent Request Validation | | S | | | | | |
| 2100D | DMG | Dependent Demographic Information | | S | | | | | |
| 2100D | INS | Dependent Relationship | | S | | | | | |
| 2100D | DTP | Dependent Date | | S | | | | | |
| *2110D* | *EB* | *Dependent Eligibility or Benefit Information* | | *S* | | | | | |
| 2110D | EB | Dependent Eligibility or Benefit Information | | S | | | | | |
| 2110D | HSD | Health Care Services Delivery | | S | | | | | |
| 2110D | REF | Dependent Additional Identification | | S | | | | | |
| 2110D | DTP | Dependent Eligibility/Benefit Date | | S | | | | | |
| 2110D | AAA | Dependent Request Validation | | S | | | | | |
| 2110D | MSG | Message Text | | S | | | | | |

| Loop | SegID | HIPAA Name | DT | Req | File | Field | DT | Comment | CommentType |
|------|-------|-----------|-----|-----|------|-------|-----|---------|-------------|
| *2115D* | *III* | *Dependent Eligibility or Benefit Additional Information* | | *S* | | | | | |
| 2115D | III | Dependent Eligibility or Benefit Additional Information | | S | | | | | |
| 2115D | LS | Dependent Eligibility or Benefit Information | | S | | | | | |
| *2120D* | *NM1* | *Dependent Benefit Related Entity Name* | | *S* | | | | | |
| 2120D | NM1 | Dependent Benefit Related Entity Name | | S | | | | | |
| 2120D | N 3 | Dependent Benefit Related Entity Address | | S | | | | | |
| 2120D | N 4 | Dependent Benefit Related Entity City/State/ZIP Code | | S | | | | | |
| 2120D | PER | Dependent Benefit Related Entity Contact Information | | S | | | | | |
| 2120D | PRV | Dependent Benefit Related Provider Information | | S | | | | | |
| 2120D | LE | Loop Trailer | | S | | | | | |
| 2120D | SE | Transaction Set Trailer | | R | | | | | |

## Comment Type Legend:

Case Management = "Nice to Have" fields for case reviewers.

Electronic COB = If we do electronic COB, these fields will be needed.

HIPAA Questions = Questions about interpreting the HIPAA Implementation Guides.

HIPAA Required = Required fields in HIPAA that don't seem to be in the legacy system.

Map Codes = Need to crosswalk local codes to standard codes.

Match Back = Fields received on an incoming transaction that must be returned in the response.

Nice to Have = Optional fields that are useful for other reasons.

Policy Issues = Decisions to be made by system experts.

Processing Logic = Logic that needs to be built into either the front end or MMIS.

System Questions = Questions about the legacy systems.

Translation = Only use to program translations.

## Column Heading Legend:

"DT" = Data Type

## COBOL Data Types Legend:

X(n) - Character data with length of n bytes

9(n) - Integer data with length of n bytes

S9(n) - Signed integer data with length of n bytes

9(n)V99 or 9(n)V9(2) - Numeric data with n decimal digits before the decimal point and 2 decimal digits after the decimal point

S9(n)V99 or S9(n)V9(2) - Signed numeric data with n decimal digits before the decimal point and 2 decimal digits after the decimal point

## HIPAA Data Types Legend:

ANn - Free text with length of n bytes

IDn - Coded value with length of n bytes

Nn - Numeric data with length of n bytes

Rn - Real data with length of n bytes

DT8 - Date expressed as CCYYMMDD

TM8 - Time expressed as HHMMSSDD, where H = hours (00-23), M = minutes (00-59), S = integer seconds (00-59) and DD = decimal seconds ((00-99)